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PTO/SB/17 (12-04v2)

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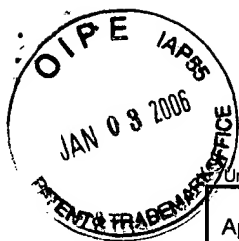
FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	09/920365-Conf. #6748
		Filing Date	August 3, 2001
		First Named Inventor	Michel A. Crepeau
		Examiner Name	S. J. Oh
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1615	
TOTAL AMOUNT OF PAYMENT	(\$) 2,110.00	Attorney Docket No.	10892-00015-US

METHOD OF PAYMENT (check all that apply)	
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<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
26		- 20 = 6	x 50.00 =	300.00	Fee (\$)		Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
2		- 3 =	x				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
	- 100 =	/50 (round up to a whole number) x					
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1253 Extension for response within third month						1,020.00	
1801 Request for continued examination (RCE) (see 37 ...						790.00	

SUBMITTED BY			
Signature	<i>Liza D. Hohenschutz</i>	Registration No. (Attorney/Agent)	33,712
Name (Print/Type)	Liza D. Hohenschutz	Telephone	(302) 658-9141
		Date	December 28, 2005

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Dated: December 28, 2005	Signature: <i>Liza D. Hohenschutz</i> (Liza D. Hohenschutz)



Application No. (if known): 09/920365

Attorney Docket No.: 10892-00015-US

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Three Month Request for Ext. of Time Under 37 CFR 1.136(a) (1 page)
Request for Continued Examination Transmittal (1 page)
Amendment (7 pages)
Fee Transmittal (1 page)
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